Evaluating a smoking cessation text message intervention for socioeconomically-disadvantaged young adults: What is helpful and what can be improved?

S. Elisha LePine,[1,2] Elias M. Klemperer,[1] Catherine Peasley-Miklus, [1] Julia C. West, [1, 3] & Andrea C. Villanti[1]
[1]Vermont Center on Behavior and Health, University of Vermont, [2]Department of Psychology, University of Florida,
[3] Department of Psychological Science, University of Vermont

Vermont Center on Behavior & Health
The University of Vermont

BACKGROUND & AIMS

- Smoking cessation interventions are often less accessible to socioeconomically disadvantaged young adults (SDYAs) and few interventions are tailored for this group.
- This study examines perceptions of a web and text message intervention trial among this group.

METHODS

The tEXt Study

- A trial of a web and text message smoking cessation intervention ("the tEXt Study")
  - Total n=346
  - Control participants (n=171) were referred to a quitline
  - Intervention participants (n=172) received daily text messages and related to quitting and weekly surveys for 12 weeks
- Surveys included open-ended response items asking Intervention participants "What did you find helpful about the tEXt study messages?" and "What could be improved about the tEXt study messages?

Analysis

- Responses were independently coded by the first author who developed inductive categories to capture common themes
- Coding was completed using Nvivo data analysis software
- Frequencies of responses in each category were compared to identify those aspects of the intervention which were most and least helpful for participants.

RESULTS

Table 1. Participant demographics: Intervention only

		n	%
Age			
	18-20	21	12.2
	21-24	46	26.7
	25-30	105	61.1
Sex			
	Male	23	15.2
	Female	149	86.6
Race			
	White	132	77.0
	Black or African American	15	8.7
	American Indian or Alaska Native	0	0.0
	Asian	4	2.3
	Native Hawaiian or Pacific Islander	3	1.7
	More than 1 race	17	9.9
	Other	1	0.6
	Hispanic	15	8.7

RESULTS

Table 2. Coding categories with frequency, percentage of total responses

What was helpful?		What could be improved?	
Category	**Frequency (%)**	**Category**	**Frequency (%)**
It kept me motivated	79 (31)	Nothing	114 (46)
I learned coping strategies	50 (20)	Increase the frequency of messages	28 (11)
Texts were frequent and consistent	39 (15)	Make the program more interactive	18 (7)
I felt supported	28 (11)	Personalize the messages	18 (7)
Kept me accountable	29 (11)	Send more strategies and tips	16 (6)
Everything was helpful	17 (7)	Decrease the frequency of messages	10 (4)
Nothing was helpful	17 (7)	Decrease references to smoking	9 (4)
Distracted me from cravings	12 (5)	Increase inspirational or motivational content	8 (3)
Helped me identify triggers	10 (4)	Increase reminders to check in	4 (2)
Program was responsive and interactive	11 (4)	Make messages less repetitive	2 (1)
I did not receive text messages	6 (2)	Decrease links in messages	2 (1)
Helped me plan my quit attempt	3 (1)	Create a companion app	1 (<1)
Other	30 (12)	Other	36 (14)

NB: Coding categories were non-exclusive, resulting in responses which were coded into multiple categories and sub-categories. Percentages sum to greater than 100

Examples of Responses

What was helpful?:

"It's both a distraction from the urge and a reminder not to give in"

"It felt like I had someone there to help"

"Frequency. They showed up right when I needed"

"They are available 24 hours a day with useful information"

"Kept me on track and reminded me of my goals"

What could be improved?:

"More interactivity maybe like text games you could play instead of smoking"

"Inspiration quotes for quitting"

"More often perhaps or more interactive"

"Maybe include more personalized messages "

CONCLUSIONS

- Intervention Participants provided 255 responses describing what was helpful and 249 describing what could be improved
- Responses frequently reported that study text messages were motivational and encouraging to participants during their quit attempt (31%) and that participants appreciated coping strategies to help manage their cravings (20%). While some mentioned that the frequency and consistency of messages was helpful (15%), others felt but that the frequency of the messages could be increased (11%)
- Results indicate SDYA smokers were receptive to an innovative text message cessation intervention and positive about the support received.
- Future interventions can be improved by maximizing messages containing encouragement and coping strategies and increasing the frequency of administered support.

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